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**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete If Known

Application Number	Unknown 10/804,596
Filing Date	Even Date Herewith
First Named Inventor	Lange, Michael
Group Art Unit	Unknown 3748
Examiner Name	Unknown Ching Chang

Sheet 1 of 2

Attorney Docket No: 905.020US2

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EXAMINER

Ching Chang

DATE CONSIDERED

08/18/04

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached

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Examiner Name	Unknown Ching Chang

Sheet 2 of 2

Attorney Docket No: 905.020US2

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Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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